

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO. 09781990	FILING DATE 02/14/01					
						APPLICANT(S)						
						CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1							51		1			
2							52	1				
3							53		1			
4							54		1			
5							55	1				
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12							62					
13	1						63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29	1						79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46	1						96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	4						TOTAL IND.	2				
TOTAL DEP.	46	←	↓	↓	↓		TOTAL DEP.	3	←	↓	↓	↓
TOTAL CLAIMS	50	✓	✓	✓	✓		TOTAL CLAIMS	5	✓	✓	✓	✓